

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2009</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/553,343-Conf. #2077
		Filing Date	November 13, 2006
		First Named Inventor	Hitoshi KUROYANAGI
		Examiner Name	T. Ho
		Art Unit	2821
TOTAL AMOUNT OF PAYMENT		(\$) 180.00	Attorney Docket No. 1248-0821PUS1

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2448</u> Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION																					
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																					
	FILING FEES		SEARCH FEES		EXAMINATION FEES																
		<u>Small Entity</u> Fee (\$)		<u>Small Entity</u> Fee (\$)		<u>Small Entity</u> Fee (\$)	Fees Paid (\$)														
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)															
Utility	330	165	540	270	220	110															
Design	220	110	100	50	140	70															
Plant	220	110	330	165	170	85															
Reissue	330	165	540	270	650	325															
Provisional	220	110	0	0	0	0															
							<u>Small Entity</u> Fee (\$)														
							<u>Small Entity</u> Fee (\$)														
2. EXCESS CLAIM FEES																					
Fee Description							Fee (\$)														
Each claim over 20 (including Reissues)							52														
Each independent claim over 3 (including Reissues)							220														
Multiple dependent claims							390														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Total Claims</td> <td style="width: 20%;">Extra Claims</td> <td style="width: 20%;">Fee (\$)</td> <td style="width: 20%;">Fee Paid (\$)</td> <td style="width: 20%;">Multiple Dependent Claims</td> <td style="width: 20%;">Fee (\$)</td> <td style="width: 20%;">Fee Paid (\$)</td> </tr> <tr> <td>10</td> <td>- 20 or HP</td> <td>0</td> <td>x</td> <td></td> <td></td> <td></td> </tr> </table>							Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	10	- 20 or HP	0	x				
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)															
10	- 20 or HP	0	x																		
HP = highest number of total claims paid for, if greater than 20.																					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Indep. Claims</td> <td style="width: 20%;">Extra Claims</td> <td style="width: 20%;">Fee (\$)</td> <td style="width: 20%;">Fee Paid (\$)</td> <td style="width: 20%;"></td> <td style="width: 20%;"></td> </tr> <tr> <td>4</td> <td>- 4 or HP</td> <td>0</td> <td>x</td> <td></td> <td></td> </tr> </table>							Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			4	- 4 or HP	0	x					
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)																		
4	- 4 or HP	0	x																		
HP = highest number of independent claims paid for, if greater than 3.																					
3. APPLICATION SIZE FEE																					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																					
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)															
- 100 = _____		/50 = _____		(round up to a whole number) x _____		= _____															
						Fees Paid (\$)															
4. OTHER FEE(S)																					
Non-English Specification, \$130 fee (no small entity discount)																					
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00																					

SUBMITTED BY			
Signature	Registration No. (Attorney/Agent) 29,271	Telephone (703) 205-8000	
Name (Print/Type) Charles Gorenstein	Date December 11, 2009		